

## PART B—ISSUE FEE TRANSMITTAL

B

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

PATENT & TRADEMARKS  
1996

PATENT DEPARTMENT  
ZENITH ELECTRONICS CORPORATION  
1000 MILWAUKEE AVENUE  
GLENVIEW, IL 60025

22M2/0229

*[Signature]*

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

 Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/239,616	05/09/94	018	GREGORY, B	2202 02/29/96

First Named  
Applicant

CHERRICK, SOL M.

TITLE OF  
INVENTION

REMOTELY SELECTABLE AUDIO/VIDEO/TEXT DISRUPTION

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2	6765	220-007.000	U25	UTILITY	NO	\$1250.00	05/29/96

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Roland W. Norris,  
Reg. No. 32,799  
2 Ralph Clarke, Jr.

3 \_\_\_\_\_

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WT04055 05/01/96 08239645

26-0175 040 142 1,250.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Zenith Electronics Corporation

(2) ADDRESS: (CITY &amp; STATE OR COUNTRY)

1000 Milwaukee Ave., Glenview, Illinois 60025

6a. The following fees are enclosed:

 Issue Fee  Advance Order - # of Copies \_\_\_\_\_

6b. The following fees should be charged to:

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requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

*Roland W. Norris*(Date)  
4/24/96NOTE: The Issue Fee will not be accepted from anyone other than the  
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1. TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## **Certificate of Mailing**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
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on April 24, 1996  
(Date)

Sharon Kroll  
(Name of person making deposit)

Sharon Kroll  
(Signature)

April 24, 1996  
(Date)

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